PATENT APPLICATION FEE DETERMINATION RECO								Application or Docke: Number P/2850-93					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	0.5		RTHAN	
TOTAL CLAIMS			18					RATE	FEE	つ .	RATE	ENTITY	4
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	+			FEE 770.00	1
TOTAL CHARGEABLE CLAIMS			/ / minus 20=		. 0				303,01		-	. 770.00	┨
INDEPENDENT CLAIMS			/2 minus 3 =		• 3		•	XS 9=	-	OR		0-0	-
MULTIPLE DEPENDENT CLAIM P								X43=	 	OR	×86=	258.	0
<u>ب</u>								+145=		OR	-290=		
- ;		•		less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	1028	00
2	Salfe	CLAIMS AS A	AMENDE	D - PAR' (Colun		(Column 3)	•	SMALL	ENTITY	OR	OTHER SMALL		ļ.
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-]	RATE	ADDI- TIONAL FEE	•
AMENDMENT	Total	. 18	Minus	- 2	\bigcirc	=6		XS 9=		OR	X\$18=		
AME	Independent	1.0	Minus	(2	·6		X43=	†	OR	X86=		
	FIRST PRES	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		1	.145_	-	1-	200		
		٠					L	+145=	ļ	OR	+290=		
		(Column 1)		(Calum	O		A	DDIT. FEE		OR	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE]	RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		= .	Γ	X\$ 9=		OR	X\$18=		
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	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		F			OR		-	
							L	+145= TOTAL		OR	+290=		į
							AC	DIT. FEE		OR'	TOTAL ODIT. FEEL		
-	`	(Column 1) CLAIMS		(Columi		(Column 3)	_						-
AMENDMENIC		REMAINING . AFTER AMENDMENT		NUMBI PREVIOL PAID FO	ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
2	Total 🚎	•	Minus	.		2	Γ	X\$ 9=		OR	X\$18=	,	
MA -	Indep ndent	•	Minus	***			H	X43=		l	X86=		
	HIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (CLAIM		\vdash			OR			
• 11	the entry in colur	nn 1 is less than the	B entry in col lun	nn 2. write "(O" in colu	mnia.	<u>_</u>	145=,		OR	+290=		
ii ii	the 'Highest Nur the 'Highest Nur	mber Previously Pai mber Previously Pai ber Previously Paid	d For IN THIS id For IN THIS	SPACE is I	ess than	20, enter *20.*	AD	TOTAL DIT. FEE L	ropriate box	• .	TOTAL DDIT. FEE L mn 1.		٠

FORM PTO-875 (Rev 10:03)

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